



**Fortify your family's financial future today  
with flexible and tailored solutions**

**Aditya Birla Sun Life Insurance Group Protection Solutions**

A Non-Linked Non-Participating Group Term Life Insurance Plan

**Aditya Birla Sun Life  
Insurance Company Limited**



**ADITYA BIRLA  
CAPITAL**

**LIFE INSURANCE**

In this cut-throat age of competition where technology and systems are available to every organization, it's the people who make it a success thereby differentiating the good from the great. Your organization has people that are of immense value to you. One of their prime concerns is the security and safety of their families who are financially dependent on them. Being an organization of repute you would like to share this responsibility by providing them with a solution that meets their need.

**ABSLI Group Protection Solutions** serves as an ideal way for companies to reinforce their bond with their employees. It provides life cover to the Member, by paying a lump sum benefit to the beneficiary in case of an unfortunate event. There is also a range of optional benefits available to cover other risks like accidental death, disability, critical and terminal illness.

It is a cost-effective and an ideal solution that helps you provide for the safety and security of the families of your employees in case of an unfortunate event. This policy gives you advantages of standardized coverage and very competitive premium rates.

## KEY FEATURES OF THE PLAN

**ABSLI Group Protection Solutions** is a comprehensive group insurance solution. It is a non-linked non-participating, Group Term Life Insurance Plan. This plan pays the chosen sum assured on death, critical illness, accidental death or terminal illness of the member as per the option chosen whilst the coverage is in force. The key features of this plan are as below:

- Wider target market as coverage is available to a large number and types of groups
- Simple and easy administrative processes
- Comprehensive cover through a range of riders
- Premium options, allow premium to be borne by employer or employee or both in some agreed proportion. The premium may be paid as yearly or half-yearly, quarterly or monthly
- Total adaptability, which does not restrict new eligible employees joining the group or outgoing employees leaving the group during the Cover term
- High degree of customization, flexibility and standardization
- High benefit at low cost as it offers a very high cover at very low premium rates per head
- Total flexibility, where the sum assured could be constant for all eligible employees or could vary according to grade or salary.

## PLAN AT A GLANCE

Under ABSLI Group Protection Solutions the employer, trust or association is the master policyholder and the Members are the life insured

The eligible groups under this plan are

- Employer-employee groups
- Non Employer-employee groups, which have some common group definition and are not formed for the sole purpose of getting insurance.

Cover under this product shall be offered on compulsory and voluntary basis. Under compulsory basis, individual members do not have choice to avail cover and decide the level of cover, whereas under voluntary basis, individual members enjoy option to avail cover and decide the level of cover.

<b>Group Size</b>	Minimum: 5 members Maximum: No Limit
<b>Minimum Age at Entry</b>	18 years (Age last birthday)
<b>Maximum Age at Entry</b>	Long term Base Cover: 65 years Other Base Cover: 79 years Optional Benefits: 64 years (Age last birthday)
<b>Maximum Age at Maturity</b>	Long term Base Cover: 85 years Other Base Cover options: 80 years Optional Benefits: 65 years (Age last birthday)
<b>Sum Assured Options</b>	a) Level Sum Assured b) Increasing Sum Assured
<b>Minimum Sum Assured</b>	Long term Base Cover: ₹ 30,00,000 at inception Others: 10,000 per Member;
<b>Maximum Sum Assured</b>	No Limit subject to Board Approved Underwriting Policy (BAUP)
<b>Minimum Policy Term</b>	One year renewable term: 1 year Others: Member's Cover term shall be at least 1 month, Group Master policy shall continue indefinitely until terminated.
<b>Maximum Policy Term</b>	One year renewable term: 1 year Others: Maximum Member's Cover term shall be 40 years; Group Master policy shall continue indefinitely until terminated.
<b>Cover Term</b>	One year renewable term# Minimum: 1 Year   Maximum: 1 Year Single Pay* Short Term Minimum: 1 month   Maximum: 5 Years Long Term Minimum: 6 years   Maximum: 40 years Limited Pay Short Term: NA Long Term Minimum: 6 years   Maximum: 40 years Regular Pay Short Term Minimum: 2 Years   Maximum: 5 Years Long Term Minimum: 6 years   Maximum: 40 years #Only under Single Pay level cover, subject to the boundary conditions the cover term can be chosen in multiple of 1 month. For e.g. 7 months, 13 months, 28 months etc. *Where One year renewable term cover is offered Member may be covered for one full year from the date of admission or upto next renewal of the policy
<b>Premium Paying Term</b>	One year renewable term Minimum: 1 Year   Maximum: 1 Year Single Pay: Short Term: Single Pay Long Term: Single Pay Limited Pay Short Term: NA Long Term Minimum: 5 years   Maximum: 5 years Regular Pay Short Term Minimum: 2 years   Maximum: 5 years Long Term Minimum: 6 years   Maximum: 40 years
<b>Premium Paying Mode</b>	One year renewable term, Regular/Limited Pay – Annual, Semi-annually, Quarterly or Monthly Single Pay – Single

Note: coverage under this product is classified into following categories:

OYR: One Year Renewable

Short term: Cover term between 1 month to 5 years Long

term: Cover term exceeding 5 years

Master policyholder can opt for any one of the above categories under single master policy. Different master policies shall be setup where master policyholder opts for more than one category.

At the inception master policyholder/member shall choose Premium payment term and cover term subject to above boundary conditions.

### Employer – Employee Groups

In a fast-paced & ever-changing environment, the employees of any organization form its most important & biggest assets. It is imperative for the organization to ensure that its employees are constantly motivated for which the employer needs to provide the employees freedom from financial worries.

### Modal Loading Factor

This is the factor multiplied by the annual premium to arrive at an installment premium. The modal loading factors are:

Premium paying mode	Modal Loading
Annual	1.0000
Semi-annual	0.5076
Quarterly	0.2560
Monthly	0.0858

### Free Cover Limit (FCL)

The Free Cover Limit, represents a maximum benefit, such that all Members of the group whose coverage falls under this limit, are not required to submit evidence of insurability to qualify for protection. Members, whose benefits exceed the free cover limit need to provide evidence of insurability in order to qualify for the higher coverage; any loadings or ratings, which may result from such evidence, will be applied only to the benefit in excess over the free cover limit. Evidence of insurability will be determined by underwriting. Free Cover Limit (FCL) and Non-medical limits, if any shall be as per BAUP.

### Individual Conversion Option

The Member has the option to continue their coverage as an individual policy in the event the Master policyholder has surrendered the policy. The Master Policyholder has an option to extend the insurance cover to the spouse of the Scheme Members, subject to BAUP.

### Additions/Deletion of Members

The Master Policyholder can choose to add new members by paying requisite premium, anytime as long as the Master Policy is in force. The Master Policyholder should inform ABSLI with the list of new joiners preferably within 45 days from the date of new joiners becoming eligible to be admitted under this policy. In case of inadequate premium, the cover will begin from the date of receipt of the full premium.

In case a Member leaves the scheme during the Policy Year (due to reasons other than death) the Company will refund the pro-rata premium to the Master Policyholder or Member depending upon who has paid the premium. The Master Policyholder should inform the Company of deletions for Members leaving the scheme. The risk will cease from the date of leaving.

## YOUR PLAN BENEFITS

This product offers Base Cover comprising of Death benefit and Accelerated Terminal Illness benefit available to all Members enrolled under this product.

One or more optional benefits can be chosen to enhance the base cover at the time of inception only.

Sr.No.	Benefit Options	Cover duration offered under optional benefits
1	Accidental Death Benefit	Equal to Member's Base Cover term
2	Essential Critical Illness Cover (Accelerated CI 10)	Equal to Base Cover term or 15 years, whichever is lower. To be chosen at inception or renewal of Member's Base Cover.
3	Super Critical Illness Cover (Accelerated CI 25)	
4	Mega Critical Illness Cover (Accelerated CI 50)	
5	Waiver of Premium on Critical Illness and Accidental Total & Permanent Disability <sup>A</sup>	Equal to Base Cover Premium Payment term

Only one out of the three Critical Illness Cover variants i.e. Essential Critical Illness Cover or Super Critical Illness Cover or Mega Critical Illness Cover can be chosen for a particular Member. Critical Illness Cover and Waiver of Premium Benefit Option cannot be chosen together.

^ Only available with Regular Pay with cover term upto 15 years and Limited Pay No Benefit option shall be available where increasing base cover is chosen.

ADB Sum Assured and ACI Sum Assured shall be up to Sum Assured on Death, as per the benefit specified in schedule. Single Pay shall be available to Employer-Employee and Non employer-employee homogeneous groups.

Non-Employer-Employee Group means group other than employer-employee, where a clearly evident relationship between the member and the group policyholder, for services other than insurance, exist.

Non employer-employee homogeneous groups includes:

1. Any association, where the member represents a particular profession or trade or domestic workers or anganwadi workers,
2. Government agencies,
3. Any cooperative societies,
4. Parents of school or college students as members,
5. Customers/vendors of e-commerce platform
6. Customers/vendors of any other service provider
7. Customers of bank, financial institution, society etc.
7. Vendors/Distributors/Lender/Borrowers of any entity for non-credit linked cover
8. Any other groups as may be approved by the Authority.

#### **Death Benefit**

On death of the Member during the Base Cover term, the Sum Assured on Death as per the benefit schedule is payable as a lumpsum. The nominee/s of the member may choose to receive the benefits in equal periodic instalments over the chosen period, not exceeding 5 years from the death claim event, provided the Cover is in force. Equal periodic instalments can be chosen either in Annual, Semi-Annual, Quarterly or Monthly modes. On payment of Death Benefit, the Cover for the Member under this product shall terminate.

#### **Accidental Death Benefit**

This benefit shall be only available where Accidental Death Benefit (ADB) option is chosen. In the event of death of the life insured due to an accident, where accident

occurs during the Base Cover term, the Accidental Death Benefit Sum Assured shall be paid in lumpsum, provided the cover is in force. This is an additional benefit and will be paid in addition to the Death Benefit.

Accident shall mean a sudden, unforeseen and involuntary event caused by external, visible and violent means.

Accidental Death means a death:

- which is caused by Injury resulting from an Accident,
  - which occurs due to the said Injury solely, directly and independently of any other causes,
  - which occurs within 180 days of the occurrence of such Accident and
  - is not a result from any of the causes listed in the exclusions for Accidental Death benefit
- Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a medical practitioner.

Medical Practitioner means a person who holds a valid registration from the Medical Council of any state or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of the license. The Medical Practitioner should not be:

- The Master Policyholder or the Member himself/herself; or;
- An authorised insurance intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
- Employed by or under contractual engagement with us; or
- Related to the Master Policyholder or life insured by blood or marriage.

#### **Terminal Illness Benefit**

In the event of Member being diagnosed with a Terminal Illness (TI) during the Base Cover term, Terminal Illness benefit up to Sum Assured on Death applicable as per the benefit schedule shall be paid in lumpsum and all future premiums shall be waived, provided the Cover is in force.

This is an accelerated benefit and not an additional benefit, which means payment through this benefit will not be in addition to the Death Benefit. Upon payment of TI benefit, the Cover for TI benefit shall cease and Cover for Death shall continue at level reduced by TI benefit claimed earlier and increase in Sum Assured, if applicable shall also cease.

A Member shall be regarded as terminally ill only if he/she is diagnosed as suffering from an advanced or rapidly progressing incurable and un-correctable medical condition which, in the opinion of two independent medical practitioners specializing in treatment of such illness, is highly likely to lead to death within 6 months. The Terminal Illness must be diagnosed and confirmed by independent medical practitioners registered with the Indian Medical Association and approved by the Company. The Company reserves the right for independent assessment. Further, member must not be receiving any form of treatment other than palliative medication for symptomatic relief.

The definition of medical practitioner will be as per Guidelines on Standardization in Health Insurance, and as defined below:

A Medical Practitioner is a person who holds a valid registration from the Medical Council of any state or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of the license.

The Medical Practitioner should not be:

- The Master Policyholder or Life Insured himself/herself; or;
- An authorised insurance intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
- Employed by or under contractual engagement with us; or
- Related to the Master Policyholder or life insured by blood or marriage servicing the insurance contract in question; or
- Employed by or under contractual engagement with us; or
- Related to the Master Policyholder or life insured by blood or marriage

#### **Critical Illness Benefit**

Critical Illness are the illnesses which are covered and specified in the list of critical illness covered and definitions table detailed below.

- Essential Critical Illness Cover (Accelerated Critical Illness 10): 10 specified illness shall be covered
- Super Critical Illness Cover (Accelerated Critical Illness 25): 25 specified illness shall be covered.
- Mega Critical Illness Cover (Accelerated Critical Illness 50): 50 specified illness shall be covered.

This benefit shall be only available where either of the Critical Illness Cover (Accelerated CI 10 or Accelerated CI 25 or Accelerated CI 50) Benefit option is chosen.

On the Member being diagnosed to be suffering from a covered Critical Illness as per the Critical Illness package chosen, during the ACI Cover term, ACI Benefit Sum Assured shall be paid in lumpsum, provided the Cover is in force.

This is an accelerated benefit and not an additional benefit, which means payment through this benefit will not be in addition to the Death Benefit. Upon payment of ACI benefit the Cover shall terminate for ACI.

If ACI Sum Assured is equal to the Sum Assured on Death, the Member's cover under this product will terminate along with ACI Cover else Base Cover shall continue and the Member's entitlement under Base Cover shall be reduced by the ACI Benefit claimed earlier.

Claim will be admissible only if the Member is diagnosed for the first ever occurrence of any of the covered Critical Illness.

This benefit shall be only available where either of the Accelerated Critical Illness Cover Package is chosen. Claim shall be admissible subject to exclusions and waiting period as specified in exclusions.

#### **Waiver of Premium Benefit on Critical Illness or Accidental Total & Permanent Disability**

In case Waiver of Premium on Critical Illness and Accidental Total & Permanent Disability is chosen and the Member being diagnosed is suffering from a Critical

Illness as covered under Accelerated CI 50, during the premium payment term, all future premiums payable shall be waived, provided the Cover is in force.

Waiver of Premium on Critical Illness and Accidental Total & Permanent Disability is independent of any Critical Illness Cover and payable in addition to latter.

Claim will be admissible only if the Member is diagnosed for the first ever occurrence of any of the covered Critical Illness.

Claim shall be admissible subject to exclusions and waiting period as specified

Upon payment of this benefit, the Member's Cover under Waiver of Premium on Critical Illness and Accidental Total & Permanent Disability will terminate.

### Accidental Total and Permanent Disability (ATPD)

This benefit shall be only available where Waiver of Premium on Critical Illness and Accidental Total & Permanent Disability is chosen.

In the event where Member becomes totally and irreversibly disabled as a result of accident during the premium payment term, all future premiums payable on or after immediately subsequent Base Cover anniversary shall be waived, provided the cover is in force. Accidental Total & Permanent Disability shall include:

1. The total and permanent loss of use of both hands, or both feet, or both eyes, or a combination thereof (i.e., any two limbs or one eye and one limb), will also result in the Member being regarded as totally and permanently disabled, or,
2. To be regarded as totally and permanently disabled, the Member must be unable to perform (whether aided or unaided) at least 3 of the following 6 "Activities of Daily Work":
  - i. Mobility: The ability to walk a distance of 200 meters on flat ground.
  - ii. Bending: The ability to bend or kneel to touch the floor and straighten up again and the ability to get into a standard saloon car, and out again.
  - iii. Climbing: The ability to climb up a flight of 12 stairs and down again, using the handrail if needed.
  - iv. Lifting: The ability to pick up an object weighing 2kg at table height and hold for 60 seconds before replacing the object on the table.
  - v. Writing: The manual dexterity to write legibly using a pen or pencil, or type using a desktop personal computer keyboard.
  - vi. Blindness – permanent and irreversible - Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

The disability should have lasted for at least 180 days without interruption and must be deemed permanent by a Company empanelled medical practitioner.

Total and Permanent Disability (TPD) should have been caused due to accident, wherein accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

The accident shall result in bodily injury or injuries to the Member independently of any other means. Such injury or injuries shall, within 180 days of the occurrence of the accident, directly and independently of any other means cause the TPD of the Member. In the event of TPD of the Member after 180 days of the occurrence of the accident, the Company shall not be liable to pay this benefit.

The Member's Cover must be in-force at the time of accident.

The Company shall not be liable to pay this ATPD Benefit in case TPD of the Member occurs after the date of termination of Cover under this product.

Upon payment of this benefit, the Member's Cover under this benefit will terminate.

### Sum Assured Option

The Master Policyholder can choose at the inception either of the following Sum Assured Options:

- Level Sum Assured – In this option the Sum Assured on death chosen at inception will remain constant for the entire cover term.
- Increasing Sum Assured – In this option Sum Assured on death payable on death shall increase by 5% p.a. of Sum Assured at Inception at each cover anniversary beginning with first cover anniversary. The increase in sum assured on death shall cease once the sum assured on death reaches 2 times the sum assured at inception. Sum Assured payable to the Member during the cover term shall be specified in the Benefit Schedule.

### Maturity/Survival benefit

No benefit is payable on maturity or survival.

### Paid-Up Benefit/Automatic Premium Loans

Regular & Limited Pay:

If premiums are discontinued at any time before the completion of the Premium Payment Term the entire cover under this product shall cease on expiry of grace period and no benefits shall be paid.

Single Pay: Not Applicable

### Paid-Up Benefit/Automatic Premium Loans

Regular & Limited Pay:

If premiums are discontinued at any time before the completion of the Premium Payment Term the entire cover under this product shall cease on expiry of grace period and no benefits shall be paid.

Single Pay: Not Applicable

### Surrender Benefit

a. By the Master Policyholder

In case of surrender of the Master Policy by the Master Policyholder, the Members shall have an option to continue the Cover till the end of the Base Cover term, such Cover shall continue with the same terms and conditions as the original Cover and Company/Intermediary, if any, shall continue to be responsible to serve such Members till their Cover is terminated.

In case the Member elects to discontinue the Cover upon Surrender of the Master policy, surrender value if any shall be paid.

Member's cover shall continue until the end of the policy term in case the Member exits the MPH group.

b. By the Member

Single Pay: Surrender value shall be acquired immediately after inception of risk. Surrender value shall be determined as

$$35\% \times \text{Single Premium} \times \frac{\text{Unexpired Base Cover term}}{\text{Original Base Cover term}} \times \frac{\text{Current Sum Assured on Death}}{\text{Original Sum Assured on Death}}$$

Limited Pay: Surrender value shall be acquired immediately after payment of all premiums. Surrender value shall be determined as:

$$35\% \times \text{Total Premiums paid} \times \frac{\text{Unexpired Base Cover term}}{\text{Original Base Cover term}} \times \frac{\text{Current Sum Assured on Death}}{\text{Original Sum Assured on Death}}$$

One-year renewable term: Surrender value shall be acquired immediately after inception or renewal of risk.

Surrender value shall be determined as:

$$50\% \times \text{Total Premiums paid} \times \frac{\text{Unexpired Base Cover term for which premiums are paid}}{\text{Original Base Cover term for which premiums are paid}}$$

Here, total premiums paid shall mean premiums paid for coverage year since inception or renewal, whichever is later. Original Sum Assured is the Sum Assured specified for the Member at inception. For Increasing Cover, Current Sum Assured is the Sum Assured on Death in the month of surrender.

Company may allow renewal of One-year renewable term coverage before expiry of coverage year. In such cases, refund shall be made of pro-rata premium collected.

For Level Cover, Current Sum Assured is equal to Original Sum Assured. Regular Pay: No surrender value is payable.

For the purpose of unexpired Base Cover term, part of the month shall be ignored. Underwriting extra premium and taxes shall not be included in Single premium/Total premiums paid.

Optional Benefits cannot be surrendered without surrendering Base Cover. Surrender shall not be admissible in case any accelerated benefit claim is already settled or waiver of premium is in force. No Surrender benefit is payable unless Surrender Value is acquired.

Upon surrender, Member Cover under this product shall terminate and no benefit shall be payable thereafter.

### Riders

Under One-year renewable term, the policyholder/member has a choice to add any of the below riders (as modified from time to time) to the Base Cover.

1. ABSLI Group Accidental Death and Dismemberment Plus Rider (UIN : 109B043V01) (ADD)
2. ABSLI Group Accidental Total & Permanent Disability Plus Rider (UIN : 109B044V01)(ATPD)
3. ABSLI Group Comprehensive Critical Illness Rider (CCI) (UIN : 109B040V01):

Addition of Critical Illness Premier Rider will customize group insurance cover for your members and provide them financial protection in the event life insured is diagnosed. to be suffering from covered critical illnesses / conditions.

- > Critical Illness – (CI-4)
- > Critical Illness – (CI-10)
- > Critical Illness – (CI-15)
- > Critical Illness – (CI-25)
- > Critical Illness – (CI-50)

The rider combinations that can be chosen are:

- Any one from ADD or ATPD and
- Any one option chosen from Group Comprehensive Critical Illness Rider

To avoid overlap in benefit, if a member chooses a rider, optional benefit of the same nature shall not be available. Conversely, if a member chooses ACI optional benefit then none of the ABSLI Group Comprehensive Critical Illness rider shall be available. For e.g., if a member chooses any one (CCI) rider then he/she isn't eligible to choose Essential Critical Illness (ACI10), Super Critical Illness (ACI25) or Mega Critical Illness (ACI50).

Similarly Accidental death benefit cannot be opted along with ADD rider.

The premium pertaining to health related or critical illness riders shall not exceed 100% of premium under this product, the premiums under all other life insurance riders put together shall not exceed 30% of premiums under this product and any benefit arising under each of the above-mentioned riders shall not exceed the Sum Assured under this product.

## EXCLUSIONS

**Suicide:** In case of death due to suicide within 12 months from the date of commencement of risk or revival of Cover under the non employer-employee policy, the nominee or beneficiary of the Member shall be entitled to 100% of the premiums (ignoring underwriting extra premium and applicable taxes) paid with respect to insured life since commencement of risk or revival, whichever is later, provided the Cover is in force on death due to suicide.

**Waiting Period:** For non employer-employee policy, there shall be 45 days waiting period under Base Cover. During waiting period, no claims for Base Cover shall be admissible except for claims arising due to accident. No waiting period shall apply for cover term less than one year.

### For Accelerated Critical Illness (ACI) benefit and Waiver of Premium on Critical Illness or Total Permanent Disability –

No ACI benefit will be payable in respect of any listed condition arising directly or indirectly from, though, in consequence of or aggravated by any of the following:

- Pre-Existing Disease or conditions connected to a Pre-Existing Disease will be excluded. Pre-existing Disease means any condition, ailment, Injury or disease:
  - a) that is/are Diagnosed by a physician not more than 36 months prior to date of the commencement of policy issued by us, or
  - b) for which medical advice or treatment was recommended by, or received from, a physician not more than 36 months prior to the date of commencement of the policy issued by us.
- Existence of any Sexually Transmitted Disease (STD) and its related complications
- Self-inflicted injury, suicide, insanity and deliberate participation of the Member in an illegal or criminal act with criminal intent.
- Use of intoxicating drugs / alcohol / solvent, taking of drugs except under the direction of a qualified medical practitioner.
- War – whether declared or not, civil commotion, breach of law with criminal intent, invasion, hostilities (whether war is declared or not), rebellion, revolution, military or usurped power or wilful participation in acts of violence.
- Aviation other than as a fare paying passenger or crew in a commercial licensed aircraft.
- Taking part in any act of a criminal nature with criminal intent.
- Treatment for injury or illness caused by avocations / activities such as hunting, mountaineering, steeple-chasing, professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, deliberate exposure to exceptional danger.
- Radioactive contamination due to nuclear accident.
- Failure to seek or follow medical advice, the Member has delayed medical treatment in order to circumvent the waiting period or other conditions and restriction applying to this policy.
- Any treatment of a donor for the replacement of an organ.
- Any illness due to a congenital defect or disease which has manifested or was diagnosed before the Insured attains aged 17.

### For Accidental Total and Permanent Disability (ATPD) Benefit and Waiver of Premium on Critical Illness or Total Permanent Total Permanent Disability –

ATPD should not be caused by the following:

- Attempted suicide or self-inflicted injuries while sane or insane, or whilst the Member is under the influence of any narcotic substance or drug or intoxicating liquor except under the direction of a medical practitioner; or
- Entering, exiting, operating, servicing, or being transported by any aerial device or conveyance except when on a commercial passenger airline on a regular scheduled passenger trip over its established passenger route; or
- Participation of the insured person in a criminal, illegal activity or unlawful act with criminal intent; or
- War, terrorism, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, martial law, rebellion, revolution, insurrection, military or usurper power, riot or civil commotion, strikes. War means any war whether declared or not.
- Engaging in hazardous sports or pastimes, e.g., taking part in (or practicing for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.

### For Accidental Death Benefit -

Provided that no Accidental death benefit shall be payable if Accidental death is directly or indirectly due to or caused, occasioned, accelerated, or aggravated by any of the following:

- Death as a result of any disease or infection other than directly linked with an accident.
- Suicide, attempted suicide or self-inflicted injury.
- Participation of the insured person in a criminal, illegal activity or unlawful act with criminal intent
- Taking or absorbing, accidentally or otherwise, any intoxicating liquor, drug, narcotic, medicine, sedative or poison, except as prescribed by a licensed doctor other than Member.
- Nuclear Contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.
- Entering, exiting, operating, servicing, or being transported by any aerial device or conveyance except when on a commercial passenger airline on a regular scheduled passenger trip over its established passenger route.
- Engaging in or taking part in hazardous sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee jumping.
- War, terrorism, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, martial law, rebellion, revolution, insurrection, military or usurper power, riot or civil commotion, strikes. War means any war whether declared or not.
- Service in the armed forces in time of declared or undeclared war or while under orders for warlike operations or restoration of public order.
- Accident occurring while or because the Insured is under the influence of Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.

## LIST OF CRITICAL ILLNESS COVERED & DEFINITIONS

Sr. No.	Illness/Condition	Essential Critical Illness Cover (Accelerated Critical Illness 10)	Essential Critical Illness Cover (Accelerated Critical Illness 10)	Mega Critical Illness Cover (Accelerated Critical Illness 50)
1	Cancer of Specified Severity	✓	✓	✓
2	Myocardial Infarction (First Heart Attack of specific severity)	✓	✓	✓
3	Open Chest CABG	✓	✓	✓
4	Open Heart Replacement Or Repair Of Heart Valves	✓	✓	✓
5	Kidney Failure Requiring Regular Dialysis		✓	✓
6	Stroke Resulting in Permanent Symptoms		✓	✓
7	Major Organ / Bone Marrow Transplant		✓	✓
8	Permanent Paralysis of Limbs		✓	✓
9	Multiple Sclerosis with Persisting Symptoms	✓	✓	✓
10	Coma of Specified Severity	✓	✓	✓
11	Motor Neuron Disease with Permanent Symptoms		✓	✓
12	Third Degree Burns		✓	✓
13	Deafness	✓	✓	✓
14	Loss of Speech		✓	✓
15	Aplastic Anaemia		✓	✓
16	End Stage Liver Failure	✓	✓	✓
17	End Stage Lung Failure	✓		✓
18	Bacterial Meningitis			✓
19	Fulminant Hepatitis		✓	✓
20	Muscular Dystrophy			✓
21	Parkinson's disease		✓	✓
22	Benign Brain Tumor			✓
23	Alzheimer's Disease		✓	✓
24	Aorta Graft Surgery		✓	✓
25	Loss of Limbs		✓	✓
26	Blindness	✓		✓
27	Primary (Idiopathic) Pulmonary Hypertension		✓	✓
28	Apallic Syndrome or Persistent Vegetative State (PVS)			✓
29	Encephalitis			✓
30	Chronic Relapsing Pancreatitis		✓	✓
31	Major Head Trauma		✓	✓
32	Medullary Cystic Disease			✓
33	Poliomyelitis			✓
34	Systemic Lupus Erythematous			✓
35	Brain Surgery			✓
36	Severe Rheumatoid Arthritis			✓
37	Creutzfeldt-Jacob disease			✓
38	Hemiplegia			✓
39	Tuberculosis Meningitis			✓
40	Dissecting Aortic aneurysm			✓
41	Progressive Supranuclear Palsy			✓
42	Myasthenia Gravis			✓
43	Infective Endocarditis			✓
44	Pheochromocytoma			✓
45	Eisenmenger's Syndrome			✓
46	Chronic Adrenal Insufficiency			✓
47	Progressive Scleroderma			✓
48	Elephantiasis			✓
49	Cardiomyopathy of specified severity			✓
50	Loss of Independent Existence		✓	✓

## Definitions

### 1. Cancer of Specified Severity

- I. A malignant tumour characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukaemia, lymphoma and sarcoma.
- II. The following are excluded-
  - i. All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behaviour, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3.
  - ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
  - iii. Malignant melanoma that has not caused invasion beyond the epidermis;
  - iv. All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
  - v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
  - iv. Chronic lymphocytic leukaemia less than RAI stage 3
  - v. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
  - vi. All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
  - ix. All tumours in the presence of HIV infection.

### 2. Myocardial Infarction (First Heart Attack of specific severity)

- I. The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:
  - i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
  - ii. New characteristic electrocardiogram changes
  - iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- i. Other acute Coronary Syndromes
- ii. Any type of angina pectoris
- iii. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

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The following are excluded:

- i. Other acute Coronary Syndromes
- ii. Any type of angina pectoris
- iii. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

### 3. Open Chest CABG

- I. The actual undergoing of heart surgery to correct blockage or narrowing in one or more ne via a sternotomy (cutting through the breast bone) or minimally invasive key hole coronary artery bypass The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.
- II. The following are excluded:
  - i. Angioplasty and/or any other intra-arterial procedures

### 4. Open Heart Replacement Or Repair Of Heart Valves

- I. The actual undergoing of open-heart valve Surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease-affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to, balloon valvotomy/ valvuloplasty are excluded.

### 5. Kidney Failure Requiring Regular Dialysis

- I. End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

### 6. Stroke Resulting in Permanent Symptoms

- I. Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolization from an extracranial source. Diagnosis has to be confirmed by a medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.
- II. The following are excluded:
  - i. Transient ischemic attacks (TIA)
  - ii. Traumatic Injury of the brain
  - iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

### 7. Major Organ / Bone Marrow Transplant

- I. The actual undergoing of a transplant of:
  - i. One of the following human organs: Heart, lung, liver, Kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
  - ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.
- II. The following are excluded:
  - i. Other stem-cell transplants
  - ii. Where only islets of langerhans are transplanted

### 8. Permanent Paralysis of Limbs

- I. Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

### 9. Multiple Sclerosis with Persisting Symptoms

- I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
  - i. Investigations including typical MRI findings, which unequivocally confirm the diagnosis to be multiple sclerosis and
  - ii. There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.
- II. Other causes of neurological damage such as SLE and HIV are excluded.

### 10. Coma of Specified Severity

- I. A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all the following:
  - i. No response to external stimuli continuously for at least 96 hours;
  - ii. Life support measures are necessary to sustain life; and
  - iii. Permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.
- II. The condition has to be confirmed by a specialist medical practitioner. Coma resulting directly from alcohol or drug abuse is excluded.

### 11. Motor Neuron Disease with Permanent Symptoms

- I. Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis, or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

### 12. Third Degree Burns

- I. There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

### 13. Deafness

- I. Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by pure tone audiogram test and certified by an Ear, Nose and Throat (ENT) specialist. Total means "the loss of hearing to the extent that the loss is greater than 90 decibels across all frequencies of hearing" in both ears.

### 14. Loss of Speech

- I. Total and irrecoverable loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist.
- II. All psychiatric related causes are excluded.

### 15. Aplastic Anaemia

Chronic persistent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:

- a. Blood product transfusion;
- b. Marrow stimulating agents;
- c. Immunosuppressive agents; or
- d. Bone marrow transplantation.

The diagnosis must be confirmed by a haematologist using relevant laboratory investigations including Bone Marrow Biopsy resulting in bone marrow cellularity of less than 25% which is evidenced by any two of the following:

- a. Absolute neutrophil count of 500/mm<sup>3</sup> or less
- b. Platelets count less than 20,000/mm<sup>3</sup> or less
- c. Absolute Reticulocyte count of 20,000/mm<sup>3</sup> or less Temporary or reversible Aplastic Anaemia is excluded.

In this condition, the bone marrow fails to produce sufficient blood cells or clotting agents.

## 16. End Stage Liver Failure

- I. Permanent and irreversible failure of liver function that has resulted in all three of the following:
  - i. Permanent jaundice;
  - ii. Ascites; and
  - iii. Hepatic encephalopathy.
- II. Liver failure secondary to drug or alcohol abuse is excluded.

## 17. End Stage Lung Failure

- I. End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:
  - i. EV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
  - ii. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
  - iii. Arterial blood gas analysis with partial oxygen pressures of 55mmHg or less (PaO<sub>2</sub><55 mm Hg); and
  - iv. Dyspnea at rest.

## 18. Bacterial Meningitis

Bacterial infection resulting in severe inflammation of the membranes of the brain or spinal cord resulting in significant, irreversible and permanent neurological deficit. The neurological deficit must persist for at least 6 weeks resulting in permanent inability to perform three or more Activities of Daily Living.

This diagnosis must be confirmed by:

- a. The presence of bacterial infection in cerebrospinal fluid by lumbar puncture; and
- b. A consultant neurologist certifying the diagnosis of bacterial meningitis. Bacterial Meningitis in the presence of HIV infection is excluded.

Activities of Daily Living will be defined as:

- a. Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- b. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- c. Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa
- d. Mobility: the ability to move indoors from room to room on level surfaces;
- e. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- f. Feeding: the ability to feed oneself once food has been prepared and made available.

## 19. Fulminant Hepatitis

A sub-massive to massive necrosis of the liver by the Hepatitis virus, leading precipitously to liver failure. This diagnosis must be supported by all of the following:

- a. Rapid decreasing of liver size
- b. Necrosis involving entire lobules, leaving only a collapsed reticular framework;
- c. Rapid deterioration of liver function tests;
- d. Deepening jaundice; and
- e. Hepatic encephalopathy.

Acute Hepatitis infection or carrier status alone does not meet the diagnostic criteria.

## 20. Muscular Dystrophy

A group of hereditary degenerative diseases of muscle characterised by progressive and permanent weakness and atrophy of certain muscle groups. The diagnosis of muscular dystrophy must be unequivocal and made by a Neurologist acceptable to Us, with confirmation of at least 3 of the following 4 conditions:

- a. Family history of muscular dystrophy;
- b. Clinical presentation including absence of sensory disturbance, normal cerebrospinal fluid, and mild tendon reflex reduction;
- c. Characteristic electromyogram; or
- d. Clinical suspicion confirmed by muscle biopsy.

The condition must result in the inability of the Insured Person to perform at least 3 of the 6 activities of daily living as listed below (either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons) for a continuous period of at least 6 months. Activities of Daily Living will be defined as:

- a. Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- b. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- c. Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa
- d. Mobility: the ability to move indoors from room to room on level surfaces;
- e. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- f. Feeding: the ability to feed oneself once food has been prepared and made available.

## 21. Parkinson's disease

The unequivocal diagnosis of progressive, degenerative idiopathic Parkinson's disease by a Neurologist acceptable to us. The diagnosis must be supported by all of the following conditions:

- a. The disease cannot be controlled with medication;
- b. Signs of progressive impairment; and
- c. inability of the Insured Person to perform at least 3 of the 6 activities of daily living as listed below (either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons) for a continuous period of at least 6 months:

Activities of daily living:

- i. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- iii. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- iv. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- v. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.
- vi. Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence. Parkinson's disease secondary to drug and/or alcohol abuse is excluded.

Parkinson's disease secondary to drug and/or alcohol abuse is excluded.

## 22. Benign Brain Tumor

I. Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.

II. This brain tumor must result in at least one of the following and must be confirmed by the relevant specialist Medical Practitioner.

- i. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
- ii. Undergone surgical resection or radiation therapy to treat the brain tumor.

III. The following conditions are excluded:

Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

## 23. Alzheimer's Disease

Alzheimer's disease is a progressive degenerative illness of the brain, characterised by diffuse atrophy throughout the cerebral cortex with distinctive histopathological changes.

It affects the brain, causing symptoms like memory loss, confusion, communication problems, and general impairment of mental function, which gradually worsens leading to changes in personality.

Deterioration or loss of intellectual capacity, as confirmed by clinical evaluation and imaging tests, arising from Alzheimer's disease, resulting in progressive significant reduction in mental and social functioning, requiring the continuous supervision of the Insured Person.

The diagnosis must be supported by the clinical confirmation of a specialist Medical Practitioner (Neurologist) and supported by Our appointed Medical Practitioner, evidenced by findings in cognitive and neuro radiological tests (e.g. CT scan, MRI, PET scan of the Brain).

The disease must result in a permanent inability to perform three or more "Activities of Daily Living" or must require the need of supervision and permanent presence of care staff due to the disease. This must be medically documented for a period of at least 90 days

Activities of Daily Living will be defined as:

- I. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- II. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- III. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- IV. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- V. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.
- VI. Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence.

The following conditions are however not covered:

- a. non-organic diseases such as neurosis and psychiatric illnesses;
- b. alcohol related brain damage; and
- c. any other type of irreversible organic disorder/dementia.

## 24. Aorta Gra Surgery

The actual undergoing of thoracotomy or laparotomy to repair or correct aneurysm, narrowing, obstruction or dissection of the Aorta through surgical opening of the chest or abdomen. For the purpose of this cover the definition of "Aorta" shall mean the thoracic and abdominal aorta but not its branches. The Insured Person understands and agrees that we shall not cover:

- a. Surgery performed using only minimally invasive or intra-arterial techniques.
- b. Angioplasty and all other intra-arterial, catheter based techniques, "keyhole" or laser procedures.

The aorta is the main artery carrying blood from the heart. Aortic graft surgery benefit covers Surgery to the aorta wherein part of it is removed and replaced with a graft.

## 25. Loss of Limbs

I. The physical separation of two or more limbs, at or above the wrist or ankle level limbs as a result of injury or disease. This shall include medically necessary amputation necessitated by injury or disease. The separation has to be permanent without any chance of surgical correction. Loss of Limbs resulting directly or indirectly from self-inflicted injury, alcohol or drug abuse is excluded.



## 26. Blindness

- I. Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.
- II. The Blindness is evidenced by
  - i. corrected visual acuity being 3/60 or less in both eyes or;
  - ii. the field of vision being less than 10 degrees in both eyes.
  - iii. The diagnosis of blindness must be confirmed and must not be correctable by aides or surgical procedure.

## 27. Primary (Idiopathic) Pulmonary Hypertension

- I. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Catheterization. There must be permanent irreversible physical impairment to the of at least Class IV of the New York Heart Association Classification of cardiac impairment.
- II. The NYHA Classification of Cardiac Impairment are as follows:
  - i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
  - ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.
- III. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

## 28. Apallic Syndrome or Persistent Vegetative State (PVS)

Apallic Syndrome or Persistent vegetative state (PVS) or unresponsive wakefulness syndrome (UWS) is a universal necrosis of the brain cortex with the brainstem remaining intact. The patient should be in a vegetative state for a minimum of four weeks in order to be classified as UWS, PVS, Apallic Syndrome.

The diagnosis must be confirmed by a Neurologist acceptable to Us and the condition must be documented for at least one month.

## 29. Encephalitis

Severe inflammation of the brain tissue due to infectious agents like viruses or bacteria which results in significant and permanent neurological deficits for a minimum period of 30 days, certified by a specialist Medical Practitioner (Neurologist)

The permanent deficit should result in permanent inability to perform three or more Activities of daily Living.

Activities of daily living:

- I. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- II. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- III. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- IV. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- V. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.
- VI. Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence

Exclusions:

Encephalitis in the presence of HIV infection is excluded.

## 30. Chronic Relapsing Pancreatitis

More than three attacks of pancreatitis resulting in pancreatic dysfunction causing malabsorption needing enzyme replacement therapy.

The Unequivocal Diagnosis must be made by a Medical Practitioner who is a gastroenterologist and confirmed by Endoscopic Retrograde Cholangiopancreatography (ERCP).

Relapsing Pancreatitis caused directly or indirectly, wholly or partly, by alcohol is excluded

## 31. Major Head Trauma

- I. Accidental head injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes
- II. The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent" shall mean beyond the scope of recovery with current medical knowledge and technology
- III. Activities of Daily Living are:
  - i. Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
  - ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
  - iii. Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
  - iv. Mobility: the ability to move indoors from room to room on level surfaces;
  - v. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
  - vi. Feeding: the ability to feed oneself once food has been prepared and made available.

The following are excluded:

- I. Spinal cord injury;

## 32. Medullary Cystic Disease

A progressive hereditary disease of the kidneys characterised by the presence of cysts in the medulla, tubular atrophy and interstitial fibrosis with the clinical manifestations of anaemia, polyuria and renal loss of sodium, progressing to chronic renal failure.

The diagnosis must be supported by renal biopsy.

Isolated or benign kidney cysts are specifically excluded from this benefit.

## 33. Poliomyelitis

The unequivocal diagnosis of infection with the polio virus must be established by a Consultant Neurologist. The infection must result in irreversible paralysis as evidenced by impaired motor function or respiratory weakness. Expected permanence and irreversibility of the paralysis must be confirmed by a Consultant Neurologist after at least 6 months since the beginning of the event. Exclusions:

- Cases not involving irreversible paralysis shall not be eligible for a claim
- Other causes of paralysis such as Guillain-Barré Syndrome are specifically excluded.

## 34. Systemic Lupus Erythematosus

A multi-system, multifactorial, autoimmune disorder characterised by the development of auto- antibodies directed against various self-antigens. Systemic lupus erythematosus will be restricted to those forms of systemic lupus erythematosus which involve the kidneys (Class III to Class V lupus nephritis, established by renal biopsy, and in accordance with the World Health Organization (WHO) classification). The final diagnosis must be confirmed by a registered Medical Practitioner specialising in Rheumatology and

Immunology acceptable to Us, Other forms, discoid lupus, and those forms with only haematological and joint involvement are however not covered:

The WHO lupus classification is as follows:

- a. Class I: Minimal change – Negative, normal urine.
- b. Class II: Mesangial – Moderate proteinuria, active sediment.
- c. Class III: Focal Segmental – Proteinuria

## 35. Brain Surgery

The actual undergoing of Surgery to the brain under general anesthesia during which a craniotomy is performed. Exclusion:

Burr hole Surgery / brain Surgery on account of an Accident.

## 36. Severe Rheumatoid Arthritis

Unequivocal Diagnosis of systemic immune disorder of rheumatoid arthritis where all of the following criteria are met:

- Diagnostic criteria of the American College of Rheumatology for Rheumatoid Arthritis;
- Permanent inability to perform at least two (2) "Activities of Daily Living";
- Widespread joint destruction and major clinical deformity of three (3) or more of the following joint areas: hands, wrists, elbows, knees, hips, ankle, cervical spine or feet; and the foregoing conditions have been present for at least six (6) months.
- Elevated levels of C-reactive protein (CRP), or erythrocyte sedimentation rate (ESR)

Activities of daily living:

- I. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- II. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- III. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- IV. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- V. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.
- VI. Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence

## 37. Creutzfeldt-Jacob disease

Creutzfeldt-Jacob disease is an incurable brain infection that causes rapidly progressive deterioration of mental function and movement. A registered doctor who is a neurologist must make a definite diagnosis of Creutzfeldt Jacob disease based on clinical assessment, EEG and imaging. There must be objective neurological abnormalities on exam along with severe progressive dementia.

## 38. Hemiplegia

The total and permanent loss of the use of one side of the body through paralysis caused by illness or injury, except when such injury is self-inflicted.

The Unequivocal Diagnosis must be made by a Specialist in the relevant medical field.

## 39. Tuberculosis Meningitis

Meningitis caused by tubercle bacilli. Such a diagnosis must be supported by 1) and 2) and 3)

- 1) Findings in the cerebrospinal fluid (csf) report
- 2) Presence of acid fast bacilli in the cerebrospinal fluid or growth of M. Tuberculosis demonstrated in the culture report or Nucleic acid amplification tests like PCR
- 3) Certification by a registered doctor who is a specialist in neurology, or a physician with a degree of MD

The permanent deficit should result in permanent inability to perform three or more Activities for Loss of Independent Living.

Activities of daily living:

- I. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- II. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- III. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- IV. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- V. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.
- VI. Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence

#### 40. Dissecting Aortic aneurysm

A condition where the inner lining of the aorta (intima layer) is interrupted so that blood enters the wall of the aorta and separates its layers. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches. The diagnosis must be made by a registered Medical Practitioner who is a specialist with computed tomography (CT) scan, magnetic resonance imaging (MRI), magnetic resonance angiograph (MRA) or angiogram. Emergency surgical repair is required.

#### 41. Progressive Supranuclear Palsy

A degenerative neurological disease characterized by supranuclear gaze paresis, pseudobulbar palsy, axial rigidity and dementia.

The Unequivocal Diagnosis of Progressive Supranuclear Palsy must be confirmed by a Medical Practitioner who is a neurologist

The condition must result in the permanent inability to perform, without assistance, at least three (3) of the six (6) Activities of Daily Living. These conditions have to be medically documented for at least three (3) consecutive months.

Activities of daily living:

- Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances; the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene;
- Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.
- Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence

#### 42. Myasthenia Gravis

An acquired autoimmune disorder of neuromuscular transmission leading to fluctuating muscle weakness and fatigability, where all of the following criteria are met:

- Presence of permanent muscle weakness categorized as Class IV or V according to the Myasthenia Gravis Foundation of America Clinical Classification below; and
- The Diagnosis of Myasthenia Gravis and categorization are confirmed by a registered Medical Practitioner who is a neurologist.

Myasthenia Gravis Foundation of America Clinical Classification:

Class I: Any eye muscle weakness, possible ptosis, no other evidence of muscle weakness elsewhere.

Class II: Eye muscle weakness of any severity, mild weakness of other muscles.

Class III: Eye muscle weakness of any severity, moderate weakness of other muscles.

Class IV: Eye muscle weakness of any severity, severe weakness of other muscles.

Class V: Intubation needed to maintain airway.

#### 43. Infective Endocarditis

Inflammation of the inner lining of the heart caused by infectious organisms, where all of the following criteria are met:

- Positive result of the blood culture proving presence of the infectious organism(s);
- Presence of at least moderate heart valve incompetence (meaning regurgitant fraction of 20% or above) or moderate heart valve stenosis (resulting in heart valve area of 30% or less of normal value) attributable to Infective Endocarditis; and
- The Diagnosis of Infective Endocarditis and the severity of valvular impairment are confirmed by a registered Medical Practitioner who is a cardiologist.

#### 44. Pheochromocytoma

Presence of a neuroendocrine tumour of the adrenal or extra-chromaffin tissue that secretes excess catecholamines requiring the actual undergoing of surgery to remove the tumour. The Diagnosis of Pheochromocytoma must be supported by plasma metanephrine levels and / or urine catecholamines and metanephrines and confirmed by a registered doctor who is an endocrinologist.

#### 45. Eisenmenger's Syndrome

Eisenmenger's Syndrome shall mean the occurrence of a reversed or bidirectional shunt as a result of pulmonary hypertension, caused by a heart disorder.

All of the following criteria must be met:

- Presence of permanent physical impairment classified as NYHA IV; and
- The diagnosis of Eisenmenger Syndrome and the level of physical impairment must be confirmed by a registered medical practitioner who is a cardiologist.

#### 46. Chronic Adrenal Insufficiency

An autoimmune disorder causing a gradual destruction of the adrenal gland resulting in the need for life long glucocorticoid and mineral corticoid replacement therapy. The disorder must be confirmed by a registered Medical Practitioner who is a specialist in endocrinology through one of the following:

- ACTH simulation tests;
- insulin-induced hypoglycemia test;
- plasma ACTH level measurement;
- Plasma Renin Activity (PRA) level measurement.

Only autoimmune cause of primary adrenal insufficiency is included. All other causes of adrenal insufficiency are excluded.

#### 47. Progressive Scleroderma

A systemic collagen-vascular disease causing progressive diffuse fibrosis in the skin, blood vessels and visceral organs. This diagnosis must be unequivocally supported by biopsy and serological evidence and the disorder must have reached systemic proportions to involve the heart, lungs or kidneys.

The following conditions are excluded:

- Localised scleroderma (linear scleroderma or morphea);
- Eosinophilic fasciitis; and
- CREST syndrome

#### 48. Elephantiasis

Massive swelling in the tissues of the body as a result of destroyed regional lymphatic circulation by chronic filariasis infection. The unequivocal diagnosis of elephantiasis must be confirmed by a registered Medical Practitioner who is a specialist physician. There must be clinical evidence of permanent massive swelling of legs, arms, scrotum, vulva, or breasts. There must also be laboratory confirmation of microfilariae infection. Swelling or lymphedema caused by infection with a sexually transmitted disease, trauma, post-operative scarring, congestive heart failure, or congenital lymphatic system abnormalities is excluded.

#### 49. Cardiomyopathy of specified severity

An impaired function of the heart muscle, unequivocally diagnosed as Cardiomyopathy by a registered Medical Practitioner who is a cardiologist, and which results in permanent physical impairment to the degree of New York Heart Association Classification Class IV, or its equivalent, based on the following classification criteria:

Class IV - Inability to carry out any activity without discomfort. Symptoms of congestive cardiac failure are present even at rest. With any increase in physical activity, discomfort will be experienced. The Diagnosis of Cardiomyopathy has to be supported by echographic findings of compromised ventricular performance.

Irrespective of the above, Cardiomyopathy directly related to alcohol or drug abuse is excluded.

#### 50. Loss of Independent Existence

Confirmation by a Consultant Physician of the loss of independent existence due to illness or trauma, lasting for a minimum period of 6 months and resulting in a permanent inability to perform at least three (3) of the following Activities of Daily Living

Activities of Daily Living:

- Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
- Mobility: the ability to move indoors from room to room on level surfaces;
- Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- Feeding: the ability to feed oneself once food has been prepared and made available.

## TERMS & CONDITIONS

#### Free look period

By Master Policyholder:

- In case the Master Policyholder is not satisfied with the terms and conditions specified in the Master Policy Document, there shall be an option of returning the Master Policy Document to us stating the reasons thereof, within 30 days from the date of receipt of the Master Policy Document, as per IRDAI (Protection of Policyholders' Interests, Operations and Allied Matters of Insurers) Regulations, 2024.
- In case of the Product is sold through Distance Marketing mode or Electronic Issuance, the period will be 30 days from the date of receipt of the letter along with Master Policy Document (3) On receipt of the premium paid with the Master Policy Document, we shall arrange to refund the premium letter by MPH, subject to deduction of the proportionate risk premium for period on Cover plus the expenses incurred by us on stamp duty (if any).

By Member:

- In case the Member is not satisfied with the terms and conditions specified in the Certificate of Insurance, he/she has the option of returning the Certificate of Insurance to us stating the reasons thereof, within 30 days from the date of receipt of the Certificate of Insurance, as per IRDAI (Protection of Policyholders' Interests, Operations and Allied Matters of Insurers) Regulations, 2024.
- In case of the Product is sold through Distance Marketing mode or Electronic Issuance, the period will be 30 days from the date of receipt of the letter along with Certificate of Insurance
- On receipt of the letter along with the Certificate of Insurance, we shall arrange to refund the premium, subject to deduction of the proportionate risk premium for period on Cover, the expenses incurred by us on stamp duty (if any) & expenses incurred in medical examination (if any).

For administrative purposes, all Free-Look requests should be registered by Master Policy Holder, on behalf of Member.

#### Grace Period

For One year renewable term, there will be a grace period of 30 days after expiry for renewal of Cover. If premiums are not paid by the premium due date all the cover ceases and the policy lapses with immediate effect.

For Cover other than One year renewable term and non-annual modes of One year renewable term, there will be a grace period of 30 days for non-monthly premium paying mode and 15 days for monthly mode. The cover is considered to be in-force during the grace period. If a premium is not paid within the grace period, then all the benefits will lapse.

The Company shall be responsible to honour all valid claims brought under this policy in instances wherein the Master Policyholder has collected/ deducted the Premium but has failed to pay the same to the Company within the Grace Period. In the event of a claim admitted during the Grace Period, the due unpaid Premium will be recovered from the claim amount payable.

#### Waiting Period

90 days Waiting Period for ACI Benefit and Waiver of Premium on Critical Illness or Total Permanent Disability:

- The benefit shall not apply or be payable in respect of any listed conditions for which the symptoms have occurred or for which care, treatment or advice was recommended by or received from a Physician, or which first manifested itself or was contracted during the waiting period after the date of commencement of cover of member. In the event of occurrence of any of the scenarios mentioned above, the Company will refund the premiums for that benefit for the member and member's benefit cover will terminate with immediate effect.

- No waiting period applies where the condition manifests due to accident.

#### Revival

For One year renewable term policies with non-annual mode, revival may be allowed before expiry of policy year upon payment of all unpaid premiums (along with the interest). In case One year renewable term policy is not renewed with ABSLI upon expiry of policy year, MPH shall have an option to renew the same policy later. ABSLI may admit such delayed renewal after satisfying insurability as per the BAUP.

For Regular and Limited pay policies lapsed cover may be revived to its full value within five years from the due date of the first unpaid premium, subject to the following conditions:

- Policyholder/Member pays all due and unpaid policy premiums along with the interest to date
- Policyholder/Member to produce to ABSLI a satisfactory evidence of insurability in respect of the Life Insured.
- ABSLI according to its Board approved underwriting policy will decide whether to reinstate the policy to its full value.

The effective date of the revival is when these requirements are met and approved by Us as per the Board approved underwriting policy. On the effective date of the revival, all the benefits will be restored to their full value.

The monthly interest rate charged on unpaid premiums will be declared by ABSLI on June 1st of each calendar year and is determined as  $(x+1\%)/12$  rounded to the next 0.5%, where x is the base rate of the State Bank of India. The interest rate, as declared on June 1st, 2020, is 1% per month compounded annually.

Any change in basis of determination of interest rate for revival can be done only after prior approval of the Authority.

#### Discontinuance of payment of premiums

In case of One year renewable term non-annual modes, Regular pay and Limited pay, if the premium is not received even after the completion of the grace period, the policy cover lapses.

#### Policy loan

Not available under this plan.

#### Termination of the policy

Cover for the Member shall terminate on earliest of:

- Death of Member
- Upon settlement of surrender benefit
- Expiry of Base Cover term
- Free look cancellation
- Date of insured

#### Actively at Work

Subject to BAUP, Company may require that the Members covered under the Employer-employee type policy are not absent from work for more than 15 days immediately prior to commencement of Cover.

#### Change in Personal Details

ABSLI should be informed in time by the Policyholder about any correction to be made in the personal details of the Member covered under the policy. Such changes will be reviewed retrospectively if they affect the premium/other terms of the policy.

The Policyholder will have to pay any shortfall in the premium and any excess of premium will be refunded to the Policyholder or credited to the premium deposit account.

#### Tax Benefits

The income tax benefits on Your Policy may be available as per prevailing Income Tax laws in India and any amendment(s) made thereto from time to time. You are advised to consult your tax advisor for details.

#### Goods and Services Tax (GST)

ABSLI reserves the right to recover levies such as GST levied by the authorities on insurance transactions.

#### Nomination

Nomination shall be as per Section 39 of Insurance Act, 1938 as amended from time to time.

#### Assignment

Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time

#### Prohibition of Rebates – Section 41 of the Insurance Act, 1938 as amended from time to time

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance of any kind, of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Any person making default in complying with the provisions of this section shall be punishable with a fine which may extend upto 10 Lakh rupees.

#### Fraud and Mis-statement

As per the provisions of Section 45 of the Insurance Act, 1938 as amended from time to time. For more details on Section 45 of the Insurance Act, 1938 please refer to our website <https://lifeinsurance.adityabirlacapital.com>

## **RISK FACTORS AND DISCLAIMERS**

**This policy is underwritten by Aditya Birla Sun Life Insurance Company Limited (ABSLI).** This is a Non-Linked Non-Participating Group Term Life Insurance Plan. ABSLI reserves the right to recover levies such as GST levied by the authorities on insurance transactions. If there be any additional levies, they too will be recovered from you. This brochure contains only the salient features of the plan. For further details please refer to the policy contract. Tax benefits subject to changes in the tax laws.

# ABOUT ADITYA BIRLA SUN LIFE INSURANCE COMPANY LIMITED

Aditya Birla Sun Life Insurance Company Limited (“ABSLI”) is a part of Aditya Birla Capital Ltd (“ABCL”). ABSLI was incorporated on August 4<sup>th</sup>, 2000, and commenced operations on January 17<sup>th</sup>, 2001. ABSLI is a 51:49 a joint venture between the Aditya Birla Group and Sun Life Financial Inc., an international financial services organization in Canada.

ABSLI offers a range of products across the customer’s life cycle, including children future plans, wealth protection plans, retirement and pension solutions, health plans, traditional term plans and Unit Linked Insurance Plans (“ULIPs”).

As of June 30, 2024, total AUM of ABSLI stood at Rs.90,682 Crore (22% Increase YOY). ABSLI recorded a gross premium income of Rs.3,986 Crore in Q1 FY25 and registering a y-o-y growth of 28% in Gross Premium with Individual Business FYP with Single Premium at 10% at Rs 644 Crore. ABSLI has a nationwide distribution presence through 380+ branches, 11 bancassurance partners, 6 distribution channels, over 56000+ direct selling agents, other Corporate Agents and Brokers through its website. The company has over 25,000 employees and 20.03 lakh active customers.

## **About Aditya Birla Capital Limited**

Aditya Birla Capital Limited (“ABCL”) is the holding company for the financial services businesses of the Aditya Birla Group. Through its subsidiaries/JVs, ABCL provides a comprehensive suite of financial solutions across Loans, Investments, Insurance, and Payments to serve the diverse needs of customers across their lifecycle. Powered by over 50,000 employees, the businesses of ABCL have a nationwide reach with over 1,505 branches and more than 200,000 agents/channel partners along with several bank partners.

As of June 30, 2024, Aditya Birla Capital Limited manages aggregate assets under management of Rs. 4.63 Lakh Crore with a consolidated lending book of Rs 1.27 Lakh Crore through its subsidiaries/JVs.

Aditya Birla Capital Limited is a part of the US\$66 billion global conglomerate Aditya Birla Group, which is in the league of Fortune 500. Anchored by an extraordinary force of over 187,000 employees belonging to 100 nationalities, the Group is built on a strong foundation of stakeholder value creation. With over seven decades of responsible business practices, the Group’s businesses have grown into global powerhouses in a wide range of sectors - from metals to cement, fashion to financial services and textiles to trading. Today, over 50% of the Group’s revenues flow from overseas operations that span over 40 countries in North and South America, Africa, Asia, and Europe.

For more information, visit [www.adityabirlacapital.com](http://www.adityabirlacapital.com).

# Aditya Birla Sun Life Insurance Company Limited



**LIFE INSURANCE**

Life Insurance Coverage is available in this Product.

As per section 10(10D) of the Income-tax Act, 1961, proceeds from life insurance policy issued on or after 1 April 2023 shall be taxable as income from other sources if the cumulative annual premium payable by taxpayer for life insurance policies exceeds ₹ 5 lacs.

Contact our advisor or visit our website <https://lifeinsurance.adityabirlacapital.com> to know more about the various solutions. We provide a wide range of Life Insurance solutions to cater to your specific protection needs.

“The Trade Logo “Aditya Birla Capital” Displayed Above Is Owned By ADITYA BIRLA MANAGEMENT CORPORATION PRIVATE LIMITED (Trademark Owner) And Used By ADITYA BIRLA SUN LIFE INSURANCE COMPANY LIMITED (ABSLI) under the License.”

Aditya Birla Sun Life Insurance Company Limited Registered Office: One World Centre, Tower 1, 16<sup>th</sup> Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai - 400 013. Customer Helpline Numbers: 1-800-270-7000 Website: <https://lifeinsurance.adityabirlacapital.com> IRDAI Reg No.109 CIN: U99999MH2000PLC128110 UIN: 109N006V10 ADV/10/24-25/1820

## **BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS / FRAUDULENT OFFERS**

IRDAI or its officials do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.